## California SPF-SIG

# Needs Assessment and Prevention Priority: Background & Overview

- SAMHSA's Strategic Prevention Framework (SPF)
  - Overview
- Dept. Alcohol & Drug Programs' (ADP) Preparations for State Incentive Grant (2010-2015)
  - Prevention programs use SPF (Cal-OMS-Pv)
  - State Epidemiology Outcomes Workgroup (SEOW 2006-10)
  - Strategic Planning Unit Strategic Planning Framework
  - Governor's Prevention Advisory Council (GPAC)
- Needs Assessment Process
  - California Epidemiological Profiles
  - California Needs Assessment Report, September 2010



## California SPF-SIG

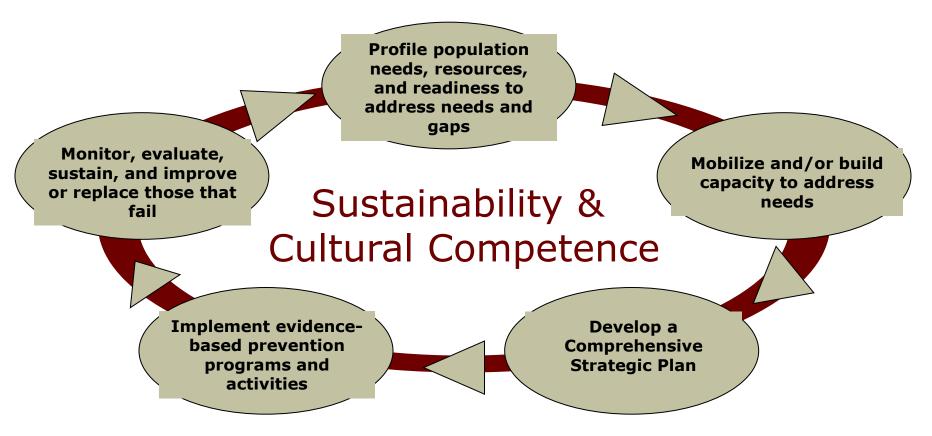
## Needs Assessment and Prevention Priority: Background & Overview

- Prioritization Process and Criteria
  - GPAC
  - ADP
- SPF-SIG Prevention Priority Proposed
  - Youth Underage and Excessive Alcohol Consumption
  - Rationale data & best practices
- GPAC SPF-SIG Workgroup Discussion
  - Critical assessment of data and rationale
  - Decision Recommend endorsement or change



## California SPF-SIG

### SAMHSA's Strategic Prevention Framework





### **ADP Preparations**

- County Prevention Programs must use SPF planning process
  - Submit strategic plans & use Cal-OMS-Pv to track progress
  - Majority of counties have selected youth alcohol use as a priority
- SEOW Project Partners (2006-2010)
  - ❖ ADP Prevention, Office of Applied Research & Analysis, Strategic Planning Unit
  - Safe & Active Communities Branch, California Dept. of Public Health
  - SEOW Project Workgroup



## California SPF-SIG

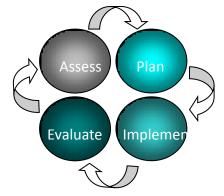
### **ADP Preparations**

- SEOW Project (2006-2010) Purpose
  - Provide state and county level surveillance
    - Identified state & local data sources & indicators
    - Compiled & summarized data
    - Produced California Epidemiological Profiles
  - Build state & local capacity to conduct ongoing statewide AOD surveillance and epidemiological analyses
    - Focused on building internal ADP capacity
    - Created three pilot county-level Epi Profiles
    - Created joint CDPH-ADP website for alcohol and drug health consequences <a href="http://epicenter.cdph.ca.gov">http://epicenter.cdph.ca.gov</a>

## California SPF-SIG

## ADP's Strategic Planning Unit

- SNAP: Statewide Needs Assessment and Planning
  - A system for data informed decision-making to prioritize department efforts in addressing statewide needs



- A state-level systematic, recurring Needs Assessment and Planning process; 3-year cycles
- Complimentary and supportive to other ADP efforts: Strategic Prevention Framework, Strategic Plan, SEOW, COSSR, CCQI, SAPT Block Grant Application, SAMHSA-NOMs
- \* A data resource to assist counties



#### **SNAP Process Overview**

- 2008 Established Business Plan
- ❖ 2009/10 Testing year
  - Five priorities established
  - Closing out test year
- ❖ 2010/11 1<sup>st</sup> Year of SNAP Cycle
  - Improvements based on testing year evaluation
  - Building stakeholders into process
  - Prioritization process added



#### **SNAP Process Overview**

California Needs Assessment Report, September 2010





## **Data Source Inventory**

#### **State Data Sources**

Behavioral Risk Factor Surveillance System (BRFSS) (CDHS; Public Health Institute; CDC)

California Adult Tobacco Survey (CATS) (CDPH's Tobacco Control Section; BRFSS)

California Health Interview Survey (CHIS) (UCLA Center for Health Policy, CDPH, Public Health Institute)

California Healthy Kids Survey (CHKS) (CDE, WestEd)

California Outcomes Measurement System - Prevention (CalOMS) (California Department of Alcohol and Drug Programs)

California Outcomes Measurement System - Treatment (CalOMS-Tx) (California Department of Alcohol and Drug Programs)

California Student Survey (CSS) (Crime and Violence Prevention Center, Office of the Attorney General; CA Department of Education; CA Department of Alcohol and Drugs; WestEd. Inc.)

California Student Tobacco Survey (CSTS) (CDPH's Tobacco Control Section)

California Tobacco Survey (CTS-Adult) (CDPH's Tobacco Control Section; UC San Diego; Westat, Inc.)

California Women's Health Survey (CWHS) (Public Health Institute's Survey Research Group (SRG); DHS' Office of Women's Health (OWH); various other State programs).

Death Statistical Master Files (Office of Vital Records [OVR], Center for Health Statistics, California Department of Health Services)

Demographic Research Unit (DRU) (California Department of Finance)

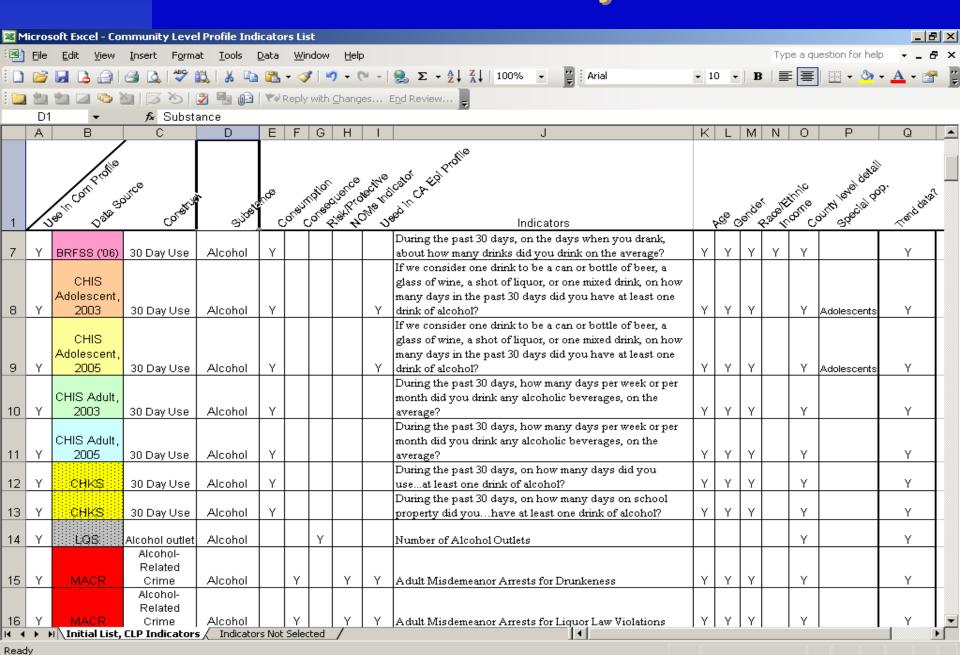
Hospital Inpatient Discharge Data (Office of Statewide Health Planning and Development) (OHSPD)

Maternal Infant Health Assessment (MIHA) (CDPH's Maternal, Child, Adolescent Branch; UCSF)

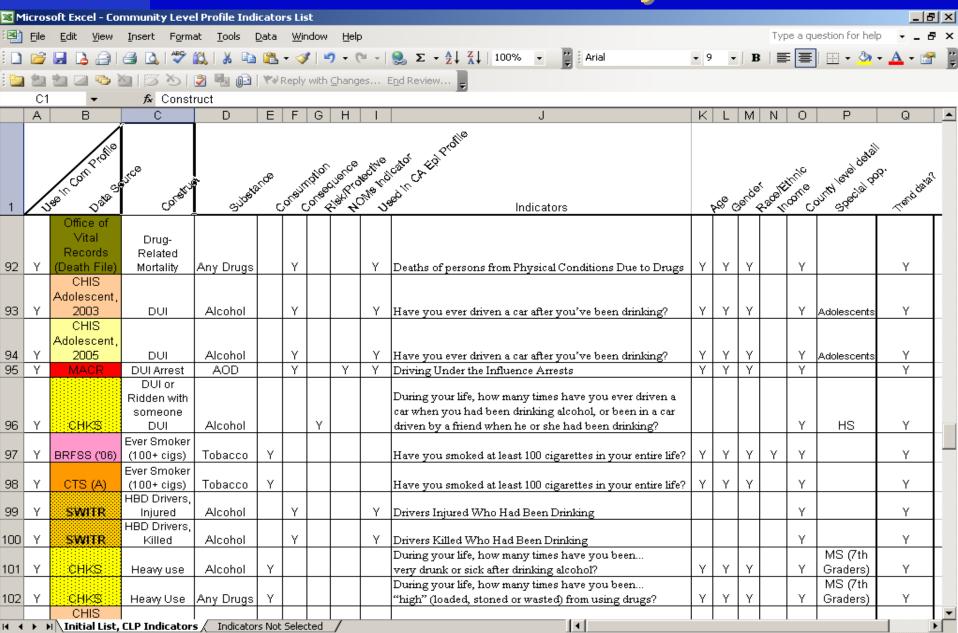
Monthly Arrest and Citation Register (MACR) (*Criminal Justice Statistics Center, California Office of the Attorney General*)

Statewide Integrated Traffic Records System (SWITR) (California Highway Patrol (CHP))

## List of Data Indicators by Substances



## List of Data Indicators by Construct



Ready

# Lifetime Use of AOD among 11th Graders, California, 2001-2008

	2001-02	2003-04	2005-06	2007-08 <sup>1</sup>
	Percentages			
Alcohol <sup>2</sup>	65.3	63.2	61.9	66.4
OTHER DRUGS				
Cocaine	9.2	7.6	7.3	10.4
Inhalants	12.6	8.9	9.5	15.2
Marijuana	44.0	38.7	38.2	41.6
Methamphetamines or Amphetamines	9.0	7.6	7.0	7.2
Prescription Painkillers <sup>3</sup>			15.1	17.6
Any Pill or Medicine <sup>4</sup>				34.8
Any Illegal Drug⁵	47.4	42.7	45.0	45.6
NO AOD <sup>6</sup>	31.6	33.1	32.8	31.5

Source: California Student Survey, 2001-08, WestED, Inc. April 2010.

# Past 30-Day Use of AOD among 11th Graders, California, 2001-08

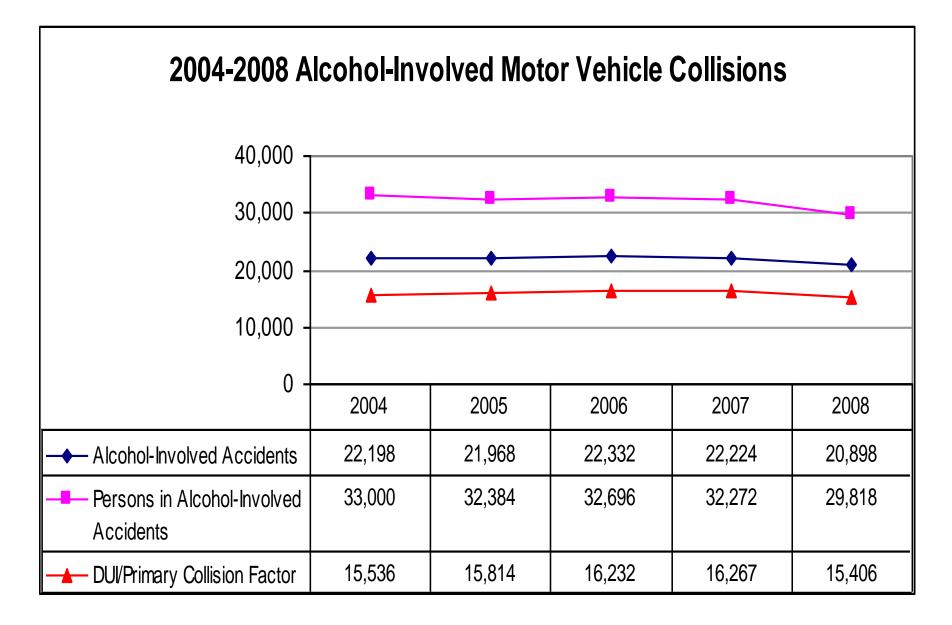
	2001-02	2003-04	2005-06	2007-08 <sup>1</sup>
	Percentages			
ALCOHOL				
Alcohol Use	40.7	37.1	35.8	41.9
Binge Alcohol Use	26.2	23.3	21.4	29.0
OTHER DRUGS				
Cocaine	4.0	4.8	3.9	4.0
Inhalants	4.0	4.6	3.8	7.1
Marijuana	23.0	19.8	19.2	23.9
Methamphetamine or Amphetamine	5.0	5.0	3.9	4.7
Any Illegal Drug <sup>2</sup>	24.6	22.8	22.4	26.2
NO AOD <sup>3</sup>	55.6	56.8	57.8	53.7

Source: California Student Survey, 2001-08, WestED, Inc. April 2010.

## Drug Use in California by Age Group: Percentages, Annual Averages based on 2006-07 NSDUHs

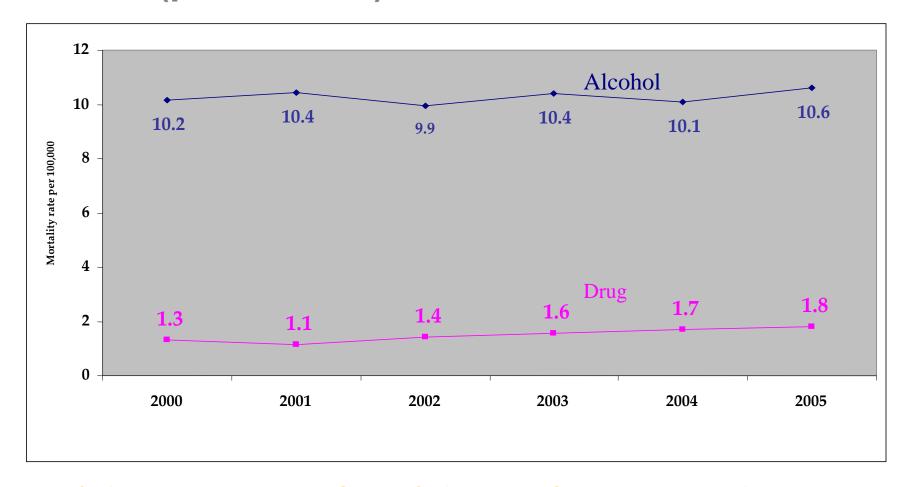
Measure ALCOHOL  Past Month Alcohol Use (Persons Aged 12 to 20)	12+	12 thru 17 26.5***	18-25 *** 12 thru 20	26+
	10.6			
Past Month Alcohol Use (Persons Aged 12 to 20)	10.6			
	40.6	17.2***		
Past Month Binge Alcohol Use (Persons Aged 12 to 20)	40-6		*** 12 thru 20	
Past Month Alcohol Use	49.6	15.5	58.6	52.8
Past Month Binge Alcohol Use	21.6	9.8	38.2	20.1
TOBACCO PRODUCTS				
Past Month Tobacco Product Use	22.7	8.7	33.6	22.7
Past Month Cigarette Use	19.8	6.9	29.3	19.9
ILLICIT DRUGS				
Past Month Illicit Drug Use	9.1	10.0	20.5	6.8
Past Month Marijuana Use	6.6	6.8	17.0	4.5
Past Month Use of Illicit Drugs Other Than Marijuana	4.0	4.7	8.4	3.1
Past Year Marijuana Use	11.2	13.0	28.2	7.8
Past Year Cocaine Use	2.4	1.7	6.6	1.7
NON-MEDICAL USE OF PRESCRIPTION DRUGS				
Past Year Non-medical Pain Reliever Use NOTE: Selected measures only	5.4	6.6	12.0	3.9

**Source:** SAMHSA, Office of Applied Studies, National Survey on Drug Use and Health, 2006 and 2007.Retrieved from <a href="http://oas.samhsa.gov/2k7State/California.htm#Fig2.2">http://oas.samhsa.gov/2k7State/California.htm#Fig2.2</a>. August 2010.



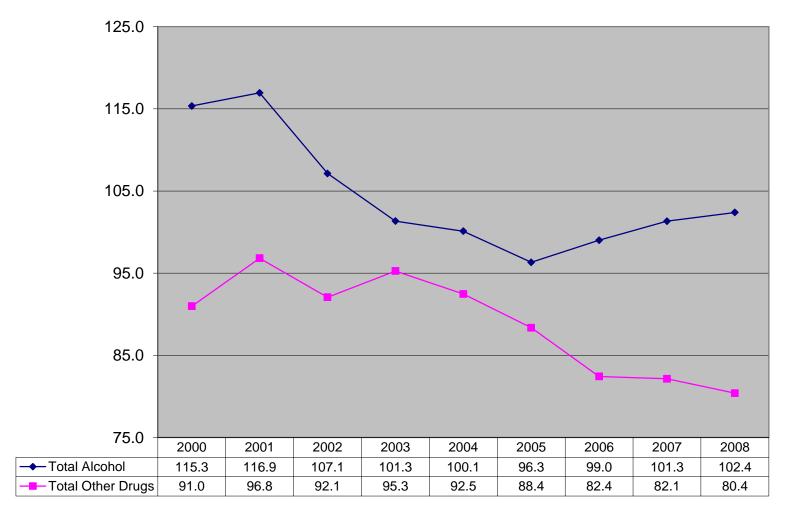
**Source**: 2007 Annual Report of Fatal and Injury Motor Vehicle Traffic Collisions; California Department of Highway Patrol. Retrieved from http://www.chp.ca.gov/switrs/xls/2007-sec5.xls

# Rates for Alcohol and Drug-related Mortality (per 100,000), California, 2000-2005

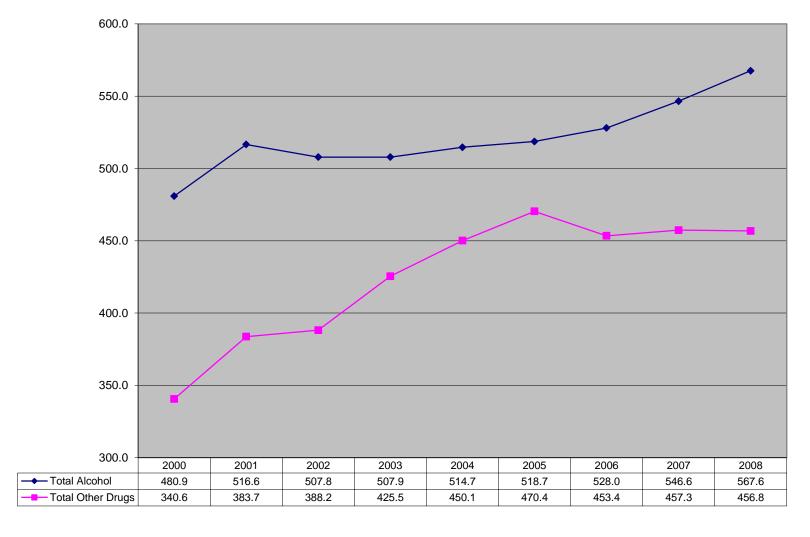


**Notes:** California Residents only; **Data Source:** California Death Statistical Master Files from 2000-2005, State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000–2050. Sacramento, CA, July 2007; **Prepared by:** EPIC Branch, CDPH, January 2008.

#### Alcohol and Other Drug Hospitalization Rates California 2000-2008 (12+ year olds) Principal Diagnoses/E-codes



#### Alcohol and Other Drug Hospitalization Rates California 2000-2008 (12+ year olds) Any Mention in Diagnoses/E-codes



#### **Executive Prioritization Process**

- SNAP 11 Recommended Priority Areas
- Apply priority setting criteria
  - Data informed
  - Balancing operational needs vs strategic activities
  - ADP/CADPAAC Survey results
  - Priority setting = "narrow and deep"
  - Achieve real change through measurable outcomes



# California SPF-SIG Priority Setting Criteria

#### Instructions:

The following list of considerations is a guide for ranking the recommended priority areas generated from the Needs Assessment Report. Please apply as many of the listed considerations as possible while ranking each recommended priority area.

#### **Considerations**

#### A. Consistent with ADP vision, mission, and organizational structure

- •Consistent with/will not undermine essential vision/mission
- •Fits into (or should be added to) existing organizational structure/activities

#### B. Importance of problem/issue to ADP and California communities/citizens:

- •Magnitude of problem (e.g., frequency, incidence, trends)
- •Severity (e.g., level of impact on community health & well being)
- •Cost (e.g., social, health, economic costs)
- •Size of the population at risk (who would benefit)
- •Degree of concern (e.g., visibility; ADP & State government; public; political will)

#### C. Availability of solutions for problem/issue:

- •Causes/reasons are identifiable
- •Risk factors/barriers are modifiable
- •Evidence-based strategies to effectively address problem/issue exist
- •If not, strategies to effectively address problem/issue can be designed
- •Impact or size of effect if problem/issue is addressed effectively



## California SPF-SIG

## **Priority Setting Criteria**

#### D. Feasibility of program/policy implementation and sustainability:

- Existence of infrastructure (e.g., staff and facilities, resources availability)
- Funding available/sustainable
- Authority/accountability/responsibility to implement is held or obtainable
- Political and cultural acceptability (degree of public concern)
- Workforce knowledge and skills (and/or opportunities for training and technical assistance)

#### E. Timeliness

- Time to implementation
- Time to results/outcomes

#### F. Evaluation of program or policy

- Ability to evaluate/measure effects
- Benefits outweigh the costs of implementation and sustainability
- Collateral benefits as a result of implementation (i.e., increased readiness, decreased attrition, decreased other health problems)

## California SPF-SIG

## **SNAP Priority Ranking Survey Results ADP and CADPAAC**

Recommended Priorities	Combined Rank (n=59)	ADP Rank (n=17)	CADPAAC Rank (n=42)
E. Health Care Reform Readiness	1	1	1
C. Treatment Effectiveness	2	3	2
B. Early Intervention Strategies - SBIRT	3	2	5
A. Prevention Strategies and Funding	4	5	3
D. Recovery Support Services	5	7	4
H. Youth Pv, Early Intervention and Tx	6	6	6
F. Excessive and Underage Alcohol Use	7	4	7
G. Prescription Drug and Opiate Abuse	8	8	8
J. Special Populations	9	9	9
I. Race and Ethnicity Data	10	10	10
K. Gambling Support Services	11	11	11

## ADP's Three Strategic Priorities

- **❖ Health Care Reform (HCR) Readiness** Planning for HCR
- \* Early Intervention Strategies Build alcohol and other drugs system capacity for early intervention strategies, i.e., SBIRT
- \* Prevention Strategies and Funding Employ more science-based, population level prevention strategies and identify new funding or resource strategies to expand evidence-based prevention activities in California



## **Proposed Prevention Priority**

- Youth Underage and Excessive Alcohol Consumption
  - Magnitude and scope of problem 12-25 age range
  - \* Evidence-based strategies and solutions available



## Summary of Rationale for Prevention Priority

- SAMHSA's prevention priority
- Data informed
  - SEOW Epidemiological Profiles
  - SNAP Report
- ADP Executive Team's prevention priority
- Priority from AOD field
  - CADPACC input to SNAP prioritization process
  - Priority in most county-level prevention plans

